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NMBA - draft Registration standard: General registration for internationally qualified registered nurses

Cairns Corporate Office

Phone: 07 4047 6400
189-191 Abbott St, Cairns QLD 4870
P.O Box 7410, Cairns, QLD 4870

Alice Springs Office

1/1B Stokes Street, Alice Springs NT 0870

Adelaide Office

29-31 Hakkinen Rd, Wingfield SA 5013

www.crana.org.au

ABN: 31 601 433 502

Registered Training Organisation (RTO) No. 40719

NMBA - draft Registration standard: General registration for internationally qualified registered nurses

Thank you for providing CRANaplus (Council for Remote Area Nurses Australia) with the opportunity to submit feedback to the public consultation from the *NMBA - draft Registration standard: General registration for internationally qualified registered nurses*.

CRANaplus is a grassroots, not-for-profit, membership-based organisation founded in 1983. We provide a wide range of services, support and opportunities to nurses, midwives, and other health professionals to ensure the delivery of safe, high quality primary healthcare to remote and isolated areas of Australia. We advocate for change on issues affecting the workforce and remote populations, including safety, health inequality, and workforce availability. We offer feedback from this position.

Feedback

1. Do you support the proposed approach in the draft registration standard? Why or why not?

CRANaplus agrees in principle to the proposed strategy for streamlining the registration for internationally trained and experienced registered nurses and there is potential for this streamlining approach to increase the pace at which targeted internationally trained and experienced nurses enter practice in Australia.

CRANaplus recognises the need for increased numbers of registered nurses across Australia as a workforce imperative. Explicitly linking streamlined registration to increased registered nurses in remote areas (Draft Registration standard: General registration for internationally qualified registered nurses, p 16) needs consideration, however. CRANaplus proposes describing the value of streamlining the registration process to support areas of general workforce need without mentioning the remote context to avoid the impression that registration streamlining is a pathway to remote, isolated practice. Appropriate and targeted preparation for internationally trained and experienced registered nurses entering remote and isolated areas is required. The minimum for registration will not meet the safe care needs of remote, isolated and vulnerable communities.

Remote and isolated communities are highly complex cultural, social, and clinical areas requiring more than minimally safe registered nurses. Remote and isolated contexts are characterised by professional and clinical isolation, with minimal supervision or professional support. Expedited pathways to nursing registration, presented as a strategy to resolve workforce issues in remote areas, raise concerns regarding the delivery of appropriate Culturally Safe clinical care to communities, those with the most significant health needs. This nursing cohort's mental health and well-being also need consideration. While registering through these pathways, working in remote contexts without appropriate clinical and cultural preparation, experience and personal and cultural support networks place communities and nurses at personal and professional risk.

2. Is the information in the draft registration standard clear? If no, please explain why.

The information provided is sometimes difficult to follow, and language used in places is equivocal. Holistic and comprehensive graphics representing the whole registration ecosystem and where the proposed

pathways sit concerning streams would assist. Flowcharts with exit and entry points within the graphics would also be helpful.

Exemplars and case studies would also assist in clarifying processes and how they might be applied.

3. Are the proposed pathways, clear and workable? If no, please explain why.

The workability of the pathways is a question of process management and application relative to outcome. The data to support the statement that the approach ‘...is expected to contribute to alleviating the workforce pressures on health, aged and primary care services across Australia through the increased supply of critically needed, safe, capable, and effective registered nurses’ is not presented and would be helpful.

For example, how many or what percentage of applicants will benefit from the additional pathways? Will the time taken to register reduce, and if so, by how much and will the sustainability of this time reduction be negated by an increase in the number of applicants? Using data from a retrospective 12-month sample may assist in concretely establishing the value of the changes. Estimating the expected increase in applicant numbers would also help when considering how workable the proposal is.

4. Do you support the requirement for successful completion of a regulatory examination process for internationally qualified registered nurses in an NMBA-approved comparable international regulatory jurisdiction? Why or why not?

CRANaplus supports the requirement to complete the regulatory examination to assure applicants have not, through the complexity of international jurisdictional processes, avoided this benchmark for safety.

5. Do you support the requirement for 1,800 hours of practice in an NMBA-approved comparable international regulatory jurisdiction/s prior to application for registration in Australia? Why or why not?

CRANaplus supports the requirement for completing a minimum of 1,800 hours of practice in an NMBA-approved comparable international regulatory jurisdiction/s before application for registration in Australia.

Graduates and those who have not consolidated skills to at least this minimum equivalent context are unlikely to find additional support to do so in the Australian system when commencing employment. Additionally, individuals will be adjusting to new work systems, culture and, potentially, language. To work as a registered nurse without this consolidation represents a patient care risk and places the registered nurse at personal and professional risk, particularly in rural and remote areas where the scope of practice is broader and greater autonomy is required.

6. Do you support the draft registration standard being extended to internationally qualified midwives from the NMBA-approved list of comparable international regulatory jurisdictions where midwifery has a comparable educational standard/framework and is regulated as a separate profession, i.e. the United Kingdom, Ireland and relevant Canadian provinces? Why or why not?

CRANaplus is unable to make comment either to agree or disagree. More detail, particularly around context of practice and initial registration pathways in other jurisdictions would assist in making an appropriate comment. CRANaplus would welcome to opportunity to contribute to the discussion representing rural and remote communities and midwifery workforce perspectives.

7. *Do you have any other feedback to the draft proposed registration standard?*

Not at this time.

Should further clarification or information in relation to feedback from this submission be sought
CRANaplus would be pleased to assist. [REDACTED]

5 October, 2023